POWER OF ATTORNEY
By Assignee

HARBOR-UCLA Research and Education Institute, assignee(s) of the application for United States Letters Patent for an improvement in

TREATMENT OF AUTOIMMUNE THYROID DISEASE BY INDUCING THE EXPRESSION OF CHEMOKINES AND OTHER CHEMOATTRACTANTS WHICH INITIATE T LYMPHOCYTE ACTIVATION

by TERRY SMITH, M.D.

the specification of which:

☒ is filed herewith, OR
☐ was filed on   , having U.S. Patent Application Serial No.   ,

does hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified application, all of the registered practitioners identified by Customer Number 22249:

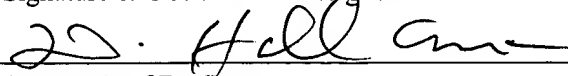**22249**

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Please send all correspondence to the attention of Kurt T. Mulville, at the above Customer Number, and direct all telephone calls to **949/567-2300.**

I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventor(s) to the assignee(s), which:

☒ is filed for recordation herewith; or
☐ was recorded at Reel _____, Frame _____; or
☐ has been sent for recordation under separate cover, copy attached herewith.

To the best of the undersigned's knowledge and belief, title is in the assignee(s) identified above. Furthermore, the undersigned is empowered to sign this document on behalf of the assignee(s).

Full Name of Assignee: HARBOR-UCLA RESEARCH AND EDUCATION INSTITUTE	
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Full Name of Declarant If Other Than Assignee:	
Title of Declarant:	
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